

Staple Issue Slip Here

POSITION	ID NO.	DATE
CLASSIFIER	10	7-28-94
EXAMINER		
TYPIST	337	8-2
VERIFIER	291	8-4
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

BEST AVAILABLE COPY

INDEX OF CLAIMS

Claim	Date
Final	
Original	
1	4/6/95
2	11/9/95
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Claim	Date
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SYMBOLS

- ✓ Rejected
- Allowed
- (Through numeral) Canceled
- + Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected